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O I P E
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7590 01/10/2008

RG & ASSOCIATES
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RAFFI GOSTANIAN	(Deponent's name)
<i>Raffi Gostanian</i>	(Signature)
4/10/08	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/964,954	09/27/2001	Monica Rose Cleghorn	I25310-1000	2550

TITLE OF INVENTION: SYSTEM AND METHOD FOR PROCESSING DATABASE QUERIES

04/11/2008 MNNGUYEN2 00000020 09964954

01 FC:2501 720.00 OP
02 FC:1504 300.00 OP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$720	\$300	\$0	\$1020	04/10/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
WU, YICUN	2165	707-003000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2 _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ACCUDATA TECHNOLOGIES, INC.

ALLEN, TEXAS

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(b)(2).

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Authorized Signature *Raffi Gostanian*

Date *4/10/08*

Typed or printed name *Raffi Gostanian*

Registration No. *42,595*

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TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages In This Submission 3

Application Number	09/964,954
Filing Date	09/27/2001
First Named Inventor	Monica Ross Martino (formerly Cleghorn)
Art Unit	2165
Examiner Name	WU, Yicun
Attorney Docket Number	125310-1000

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
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Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name			
Signature			
Printed name	Raffi Costanian		
Date	04/10/2008	Reg. No.	42,595

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Date 04/10/2008

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